



PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application No. : 10/773,774  
Applicant : Durhammer  
Filed : February 6, 2004  
Title : WATER REPELLANT CIGARETTE  
PAPER  
TC/A.U. : 1731  
Examiner : Edel, John B.  
Conf. No. : 7901  
Docket No. : 283-4 CIP  
Dated : July 3, 2007

*I hereby certify this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to:*

*Commissioner for Patents, P.O. Box 1450,  
Alexandria, Virginia 22313-1450 on July 3, 2007*

Mail Stop Amendment  
Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Signed: 

**AMENDMENT**

Sir:

In response to the Non-Final Office Action dated April 4, 2007, please amend the application in accordance with 37 C.F.R. §1.121, as follows:

**Amendments to the Claims** are reflected in the listing of the claims which begin on page 2 of this paper.

**Remarks/Arguments** begin on page 7 of this paper.

07/09/2007 HVUONG1 00000008 082461 10773774

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*[Handwritten signature]*

Attorney Docket No. 283-4 CIP

Intellectual Property Application of: Durhammer  
Serial No.: 10/773,774  
Confirmation No.: 7901  
Filed: February 6, 2004  
For: WATER REPLLANT CIGARETTE PAPER

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on July 3, 2007  
Signature: *[Handwritten signature]*

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.
- ☐ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	* 41	MINUS	** 36	= 5
INDEP.	* 5	MINUS	*** 5	= 0

SMALL ENTITY

RATE	ADDL. FEE
x 25=	\$
x 100=	\$
x 180=	\$
TOTAL	\$ 0.00

OR

OTHER THAN A  
SMALL ENTITY

RATE	ADDL. FEE
x 50=	\$250.00
x 200=	\$
x 360=	\$
TOTAL	\$ 250.00

☐ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS

- \* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.  
\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" in this space is less than 20, write "20" in this space.  
\*\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" in this space is less than 3, write "3" in this space. The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior amendment or the number of claims originally filed.

- ☒ Please charge my Deposit Account No. 08-2461 in the amount of \$250.00. A duplicate copy of this sheet is attached.
- ☐ A check in the amount of \$\_\_\_\_\_ is attached.
- ☒ The Commissioner is hereby authorized to charge any fees or additional fees associated with this communication or credit any overpayment to Deposit Account No. 08-2461. A duplicate copy of this sheet is attached.
- ☒ Any filing fees under 37 C.F.R. 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 C.F.R. 1.17.

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6900 Jericho Turnpike  
Syosset, NY 11791  
(516) 822-3550

Respectfully submitted,

*[Handwritten signature]*

Steven T. Zuschlag  
Registration No. 43,309